## FORM D

**UNITED STATES** 

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

RECEIVED

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FORM D NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

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	SEC USE	ONLY	
Prefix	_	Serial	
	DATE RE	CEIVED	
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Name of Offering ( check if this is an amendment and name has changed, and indicate change.)									
Harbert Private	Harbert Private Equity Fund II, L.L.C LLC Units								
Filing Under (Check	box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	Section 4(6)	☐ ULOE			
Type of Filing:	☐ New Filing		The continue of the continue o		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	A STATE OF THE STA			
			A. BASIC IDENT	IFICATION DATA					
<ol> <li>Enter the information</li> </ol>	tion requested about t	he issuer			<u></u>				
Name of Issuer	( check if this is	an amendment and	name has changed, and	d indicate change.)					
Harbert Private	e Equity Fund II, L	L.C							
Address of Executiv	e Offices (Number and	Street, City, State,	Zip Code)		Telephone	Number (Including Area Code)			
One Riverchase Pa	rkway South, Birmin	gham, Alabama 35	5244		205-987-5	500			
Address of Principal	Business Operations	Number and Street,	City, State, Zip Code)		Telephone Number (Including Area Code)				
(if different from Ex	ecutive Offices)								
Brief Description of	Business								
Investment in a wi	de variety of securiti	es, options and othe	er financial investmen	t transactions					
Type of Business Or	ganization								
corporation			nited partnership, alrea			er (please specify):			
business trust		lin	nited partnership, to be	formed	lin	nited liability company			
	Date of Incorporation poration or Organization	on: (Enter two-letter	U.S. Postal Service ab Canada; FN for other	•	Year 0 2 DE	☑ Actual ☐ Estimated			

### **GENERAL INSTRUCTIONS**

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity
securities of the issuer;
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Member
Full Name (Last name first, if individual)
Harbert Private Equity Fund II MM, L.L.C.
Business or Residence Address (Number and Street, City, State, Zip Code)
One Riverchase Parkway South, Birmingham, Alabama 35244
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Harbert, Raymond J.
Business or Residence Address (Number and Street, City, State, Zip Code)
One Riverchase Parkway South, Birmingham, Alabama 35244
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Luce, Michael D.
Business or Residence Address (Number and Street, City, State, Zip Code)
One Riverchase Parkway South, Birmingham, Alabama 35244
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Boutwell, David A.
Business or Residence Address (Number and Street, City, State, Zip Code)
One Riverchase Parkway South, Birmingham, Alabama 35244
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Piassick, Joel B.
Business or Residence Address (Number and Street, City, State, Zip Code)
1100 Peachtree Street, Suite 2800, Atlanta, Georgia 30309-4530
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Check Box(es) that Apply: Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

Business or Residence Address (Number and Street, City, State, Zip Code)

Full Name (Last name first, if individual)

Full Name (Last name first, if individual)

	B. INFORMATION ABOUT OFFERING		
1.	Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.	Yes	No ⊠
<ol> <li>3.</li> </ol>	What is the minimum investment that will be accepted from any individual?  * a lesser amount may be accepted at the discretion of the Managing Member  Does the offering permit joint ownership of a single unit?	\$ <u>1,000</u> Yes ⊠	No
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Full Na	me (Last name first, if individual)		
Busines	Not Applicable s or Residence Address (Number and Street, City, State, Zip Code)		
Name o	f Associated Broker or Dealer		
(Check	AK	All State	S
Full Na	me (Last Name first, if individual)		
Busines	s or Residence Address (Number and Street, City, State, Zip Code)		
Name o	f Associated Broker or Dealer		
	Which Person Listed Has Solicited or Intends to Solicit Purchasers   "All States" or check individual States)	All State	5
Full Na	me (Last Name first, if individual)		
Busines	s or Residence Address (Number and Street, City, State, Zip Code)	· <u></u>	
Name o	f Associated Broker or Dealer		1
	Which Person Listed Has Solicited or Intends to Solicit Purchasers   "All States" or check individual States)	All State:	5

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	AND USE OF P	ROCEEDS
Ι.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box $\square$ and indicate in the column below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		<u> </u>
	•		-
	Other (Specify):LLC Units	\$ <u>200,000,000*</u>	\$156,650,000
	Total	\$ <u>200,000,000*</u>	\$156,650,000
2.	Answer also in Appendix, Column 3, if filing under ULOE  * Up to \$250,000,000 at the discretion of the Managing Member  Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".	Number	Aggregate Dollar
		Investors	Amount of Purchase
	Accredited Investors	77	\$156,650,000
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	1,700 01 010	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
I. a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securitie offering. Exclude amounts relating solely to organization expenses of the issuer. The information given as subject to future contingencies. If the amount of an expenditure is not known, furnish an and check the box to the left of the estimate.	may be	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$5,000
	Accounting Fees		\$10,000
	Engineering Fees	——————————————————————————————————————	2
	Other Expenses (identify)		\$
	Total	\	J

b. Enter the difference between the aggregate response to Part C-Question 1 and total experant C-Question 4.a. This difference is the "a issuer."	nses furnished in response to adjusted gross proceeds to the			\$ <u>199,985,000</u>
Indicate below the amount of the adjusted gross proposed to be used for each of the purposes sh purpose is not known, furnish an estimate and ch estimate. The total of the payments listed mu proceeds to the issuer set forth in response to Part	own. If the amount for any eck the box to the left of the strength equal the adjusted gross			
		Payments t Officers, Directors & Affiliates	&	Payments To Others
Salaries and fees		\$	_ 🗆	\$
Purchase of real estate		\$	_ 🗆	\$
Purchase, rental or leasing and installation		\$	_ 🗆	\$
Construction or leasing of plant building	s and facilities	\$	_ 🗆	\$
Acquisition of other businesses (incluinvolved in this offering that may be us or securities of another issuer pursuant to	ed in exchange for the assets	\$		\$
Repayment of indebtedness		\$	_ 🗆	\$
Working capital		\$	_ 🗆	\$
Other (Specify) Organizational costs,	legal expenses and investments	\$	_ 🛛	\$ <u>199,985,000</u>
		\$	_ □	
		\$	_ 🗆	\$ \$
Column Totals	П	\$	_ 🛛	\$_199,985,000
Total Payments Listed (column totals add	_	\\ ⊠ s		
			177,700,00	
suer has duly caused this notice to be signed by the u				
utes an undertaking by the issuer to furnish to the U. Sissuer to any non-accredited investor pursuant to para		i, upon written request	or its start,	me information fur
Print or Type) rt Private Equity Fund II, LLC	Signatury B Pum	l up Da		28 <sub>, 2004</sub>
of Signer (Print or Type)	Title of Signer (Print or Type)	_		
Piassick	Manager, Harbert Private Equity	Fund II MM, LLC, it	s Managin	g Member

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	The state of the s	E. STATE SIGNATUI	RE					
1.	Is any party described in 17 CFR 230.	252(c), (d), (e) or (f) presently subject to any of See Appendix, Column 5, for state response.		rovisions of such rule? Yes No				
2.	The undersigned issuer hereby underta (17 CFR 239.500) at such times as rec	akes to furnish to any state administrator of an urired by state law.	y state in which this not	ice is filed, a notice on Form D				
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.	-	t the issuer is familiar with the conditions that thich this notice is filed and understands tha itions have been satisfied.		-				
	uer has read this notification and know ed person.	vs the contents to be true and duly caused to	this notice to be signed	on its behalf by the undersigned duly				
•	Print or Type) t Private Equity Fund II, LLC	Signature Del Pront	VP	Date October 28, 2004				
Name of	f Signer (Print or Type)	Title of Signer (Print or Type)						

Manager, Harbert Private Equity Fund II MM, LLC, its Managing Member

## Instruction:

Joel B. Piassick

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APPI	ENDIX					
1		2	2	T	440	1 .	·			
1	accredite	o sell to non- d investors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Ту	4  Type of investor and amount purchased in State  (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- accredited Investors	Amount	Yes	No	
AL	1 05	No X	Membership interests	38	\$86,200,000		Amount	1 65	X	
AK		71	<b>F</b>	30	\$00,200,000				<u> </u>	
AZ								<del> </del>		
								ļ		
AR CA		X	Membership interests	2	\$3,500,000				X	
CO			-	_	42,200,000					
CT	im.	X	Membership interests	1	\$750,000			-	X	
DE		X	Membership interests	1	\$250,000		2		X	
DC		X	Membership interests	1	\$250,000				X	
FL		X	Membership interests	1	\$1,000,000				X	
GA		X	Membership interests	12	\$10,200,000		Manager Manage		X	
HI										
ID				.,	<u> </u>					
IL								<del> </del>		
IN										
IA	<del></del>	<del></del>		·				<b>†</b>		
KS		<u> </u>								
KY		X	Membership interests	1	\$250,000				X	
LA										
ME										
MD										
MA										
MI										
MN										
MS										
MO		X	Membership interests	1	\$15,000,000				X	
MT										
NE										
NV										
NH										
NJ										
NM										
NY		X	Membership interests	10	\$28,000,000				X	
NC		X	Membership interests	1	\$250,000				X	
ND									1	

1	2 3 4					5							
	accredited S	sell to non- I investors in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			ppe of investor and amount purchased in State of (Part C-Item 2) (F		Type of investor and amount purchased in State (Part C-Item 2)		Disquali under ULOE attach exp of waiver (Part E-	State (if yes, planation granted
				Number of Accredited		Number of Non- accredited Investors							
State	Yes	No		Investors	Amount	accredited investors	Amount	Yes	No				
ОН													
OK		X	Membership interests	1	\$500,000				X				
OR													
PA		X	Membership interests	4	\$9,500,000				X				
RI													
SC		X	Membership interests	1	\$500,000				X				
SD													
TN		X	Membership interests	2	\$500,000				X				
TX													
UT													
VT													
VA													
WA													
WV													
WI													
WY													
PR													

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